MULTIPLE DEPENDENT CLAIM								SERIAL NO.				FILING DATE		
	FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							APPLICA	NT(S)	1 Ո	/019318			
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-136¢	(3/78)	LOCAL AND		<u> </u>		建型		TOTAL			`	经证明		
				WAY BE	AD FO	A ADDITI	BIAF.	CT ATMO A	B 41/200		U.S. DE	PARTME	V	Aluma

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